

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

ALAMEDA COUNTY TREASURER
1221 OAK ST

OAKLAND

CA 94612

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,292,564.89

Gross Claim \$3,292,564.89

Net Claim / Payment Amount \$3,292,564.89

YTD Amount: \$9,873,859.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE

CA 96120

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 83,939.58

Gross Claim \$83,939.58

Net Claim / Payment Amount \$83,939.58

YTD Amount: \$251,720.97

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

AMADOR COUNTY TREASURER
810 COURT ST

JACKSON

CA 95642

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 151,095.66

Gross Claim \$151,095.66

Net Claim / Payment Amount \$151,095.66

YTD Amount: \$453,110.97

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 3 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY CA 94704

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 278,978.61

Gross Claim \$278,978.61

Net Claim / Payment Amount \$278,978.61

YTD Amount: \$836,610.87

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 538,529.69

Gross Claim **\$538,529.69**

Net Claim / Payment Amount **\$538,529.69**

YTD Amount: **\$1,614,961.80**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS

CA 95249

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 163,377.05

Gross Claim **\$163,377.05**

Net Claim / Payment Amount **\$163,377.05**

YTD Amount: **\$489,940.85**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

COLUSA COUNTY TREASURER
546 JAY ST

COLUSA

CA 95932

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 136,048.76

Gross Claim \$136,048.76

Net Claim / Payment Amount \$136,048.76

YTD Amount: \$407,987.82

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ

CA 94553

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,091,540.27

Gross Claim **\$2,091,540.27**

Net Claim / Payment Amount **\$2,091,540.27**

YTD Amount: **\$6,272,184.59**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY

CA 95531

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 143,204.09

Gross Claim \$143,204.09

Net Claim / Payment Amount \$143,204.09

YTD Amount: \$429,445.47

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

EL DORADO COUNTY TREASURER
360 FAIR LN

PLACERVILLE

CA 95667

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 374,283.88

Gross Claim **\$374,283.88**

Net Claim / Payment Amount **\$374,283.88**

YTD Amount: **\$1,122,415.67**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

FRESNO COUNTY TREASURER
PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,264,697.34

Gross Claim \$2,264,697.34

Net Claim / Payment Amount \$2,264,697.34

YTD Amount: \$6,791,454.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS

CA 95988

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 143,978.06

Gross Claim \$143,978.06

Net Claim / Payment Amount \$143,978.06

YTD Amount: \$431,766.48

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

HUMBOLDT COUNTY TREASURER
825 FIFTH ST RM 125

EUREKA

CA 95501

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 332,144.30

Gross Claim \$332,144.30

Net Claim / Payment Amount \$332,144.30

YTD Amount: \$996,046.01

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 13 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

IMPERIAL COUNTY TREASURER

940 WEST MAIN ST

EL CENTRO

CA 92243 2863

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 457,582.01

Gross Claim \$457,582.01

Net Claim / Payment Amount \$457,582.01

YTD Amount: \$1,372,213.04

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

INYO COUNTY TREASURER

PO BOX 0

INDEPENDENCE

CA 93526

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 97,109.06

Gross Claim \$97,109.06

Net Claim / Payment Amount \$97,109.06

YTD Amount: \$291,214.07

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO

CA 95798 1240

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,954,528.87

Gross Claim \$1,954,528.87

Net Claim / Payment Amount \$1,954,528.87

YTD Amount: \$5,861,309.98

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 16 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

KINGS COUNTY TREASURER
PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 384,507.49

Gross Claim \$384,507.49

Net Claim / Payment Amount \$384,507.49

YTD Amount: \$1,153,074.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT

CA 95453

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 190,498.27

Gross Claim \$190,498.27

Net Claim / Payment Amount \$190,498.27

YTD Amount: \$571,272.92

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 143,430.48

Gross Claim **\$143,430.48**

Net Claim / Payment Amount **\$143,430.48**

YTD Amount: **\$430,124.38**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

LOS ANGELES COUNTY TREASURER
PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 26,290,141.03

Gross Claim \$26,290,141.03

Net Claim / Payment Amount \$26,290,141.03

YTD Amount: \$78,839,800.38

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 20 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 402,717.45

Gross Claim **\$402,717.45**

Net Claim / Payment Amount **\$402,717.45**

YTD Amount: **\$1,207,683.26**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

MARIN COUNTY TREASURER

PO BOX 4220
CIVIC CENTER
SAN RAFAEL

CA 94913

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 521,725.95

Gross Claim **\$521,725.95**

Net Claim / Payment Amount **\$521,725.95**

YTD Amount: **\$1,564,570.15**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

MARIPOSA COUNTY TREASURER
PO BOX 36

MARIPOSA CA 95338

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 97,854.50

Gross Claim \$97,854.50

Net Claim / Payment Amount \$97,854.50

YTD Amount: \$293,449.53

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH

CA 95482

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 231,759.89

Gross Claim **\$231,759.89**

Net Claim / Payment Amount **\$231,759.89**

YTD Amount: **\$695,009.72**

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 24 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

MERCED COUNTY TREASURER
PO BOX 981311

WEST SACRAMENTO CA 95798 1311

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 677,608.08

Gross Claim \$677,608.08

Net Claim / Payment Amount \$677,608.08

YTD Amount: \$2,032,034.97

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 25 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS

CA 96101

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 91,255.96

Gross Claim \$91,255.96

Net Claim / Payment Amount \$91,255.96

YTD Amount: \$273,661.58

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

MONO COUNTY TREASURER

PO BOX 495

BRIDGEPORT

CA 93517

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 95,173.67

Gross Claim \$95,173.67

Net Claim / Payment Amount \$95,173.67

YTD Amount: \$285,410.16

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,079,268.11

Gross Claim \$1,079,268.11

Net Claim / Payment Amount \$1,079,268.11

YTD Amount: \$3,236,547.20

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 28 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

NAPA COUNTY TREASURER
1195 THIRD ST RM 108

NAPA

CA 94559 3035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 310,054.35

Gross Claim **\$310,054.35**

Net Claim / Payment Amount **\$310,054.35**

YTD Amount: **\$929,801.91**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

NEVADA COUNTY TREASURER
PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 253,773.45

Gross Claim \$253,773.45

Net Claim / Payment Amount \$253,773.45

YTD Amount: \$761,024.75

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

ORANGE COUNTY TREASURER
PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 7,481,233.48

Gross Claim \$7,481,233.48

Net Claim / Payment Amount \$7,481,233.48

YTD Amount: \$22,434,986.32

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 31 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

PLACER COUNTY TREASURER

2976 Richardson Dr.

Auburn

CA 95603

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 628,387.72

Gross Claim **\$628,387.72**

Net Claim / Payment Amount **\$628,387.72**

YTD Amount: **\$1,884,431.21**

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 32 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

PLUMAS COUNTY TREASURER
PO BOX 176

QUINCY

CA 95971

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 131,828.27

Gross Claim **\$131,828.27**

Net Claim / Payment Amount **\$131,828.27**

YTD Amount: **\$395,331.26**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO

CA 95812 4035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 4,798,527.00

Gross Claim **\$4,798,527.00**

Net Claim / Payment Amount **\$4,798,527.00**

YTD Amount: **\$14,389,991.70**

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 34 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO

CA 95798 0264

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,957,635.77

Gross Claim **\$2,957,635.77**

Net Claim / Payment Amount **\$2,957,635.77**

YTD Amount: **\$8,869,462.27**

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 35 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SAN BENITO COUNTY TREASURER

COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER

CA 95023

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 183,975.19

Gross Claim **\$183,975.19**

Net Claim / Payment Amount **\$183,975.19**

YTD Amount: **\$551,711.28**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SAN BERNARDINO CO TREASURER
PO BOX 1859

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 4,856,818.76

Gross Claim \$4,856,818.76

Net Claim / Payment Amount \$4,856,818.76

YTD Amount: \$14,564,799.08

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 37 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST SACRAMENTO

CA 95798 0304

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 7,542,593.52

Gross Claim **\$7,542,593.52**

Net Claim / Payment Amount **\$7,542,593.52**

YTD Amount: **\$22,618,994.96**

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 38 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

CA 95814 2920

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,708,722.45

Gross Claim \$1,708,722.45

Net Claim / Payment Amount \$1,708,722.45

YTD Amount: \$5,124,177.04

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 39 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SAN JOAQUIN COUNTY TREASURER
PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,554,653.31

Gross Claim **\$1,554,653.31**

Net Claim / Payment Amount **\$1,554,653.31**

YTD Amount: **\$4,662,149.07**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 627,085.49

Gross Claim \$627,085.49

Net Claim / Payment Amount \$627,085.49

YTD Amount: \$1,880,526.05

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 41 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

Sacramento

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,501,686.40

Gross Claim **\$1,501,686.40**

Net Claim / Payment Amount **\$1,501,686.40**

YTD Amount: **\$4,503,310.05**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,068,921.18

Gross Claim \$1,068,921.18

Net Claim / Payment Amount \$1,068,921.18

YTD Amount: \$3,205,518.47

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 43 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SANTA CLARA CO TREASURER
PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 4,230,280.84

Gross Claim **\$4,230,280.84**

Net Claim / Payment Amount **\$4,230,280.84**

YTD Amount: **\$12,685,915.11**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ

CA 95061

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 679,335.49

Gross Claim \$679,335.49

Net Claim / Payment Amount \$679,335.49

YTD Amount: \$2,037,215.17

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 45 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SHASTA COUNTY TREASURER
PO BOX 1859

SACRAMENTO CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 446,773.09

Gross Claim \$446,773.09

Net Claim / Payment Amount \$446,773.09

YTD Amount: \$1,339,798.88

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 46 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SIERRA COUNTY TREASURER
PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 85,752.57

Gross Claim \$85,752.57

Net Claim / Payment Amount \$85,752.57

YTD Amount: \$257,157.82

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SISKIYOU COUNTY TREASURER
311 FOURTH ST RM 104

YREKA

CA 96097

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 159,393.08

Gross Claim \$159,393.08

Net Claim / Payment Amount \$159,393.08

YTD Amount: \$477,993.57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

SOLANO COUNTY T TC

675 TEXAS ST STE 1900

FAIRFIELD

CA 94533 6337

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 931,532.46

Gross Claim **\$931,532.46**

Net Claim / Payment Amount **\$931,532.46**

YTD Amount: **\$2,793,512.33**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SONOMA COUNTY TREASURER
PO BOX 1204

SACRAMENTO CA 95812 1204

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,046,672.03

Gross Claim \$1,046,672.03

Net Claim / Payment Amount \$1,046,672.03

YTD Amount: \$3,138,796.93

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 50 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

STANISLAUS COUNTY TREASURER
PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,186,335.73

Gross Claim \$1,186,335.73

Net Claim / Payment Amount \$1,186,335.73

YTD Amount: \$3,557,625.34

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

SUTTER COUNTY TREASURER
PO BOX 546

YUBA CITY CA 95992

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 439,957.36

Gross Claim \$439,957.36

Net Claim / Payment Amount \$439,957.36

YTD Amount: \$1,319,359.61

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

TEHAMA COUNTY TREASURER
PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 184,654.37

Gross Claim \$184,654.37

Net Claim / Payment Amount \$184,654.37

YTD Amount: \$553,748.03

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

TRI CITY MENTAL HEALTH
2008 N GAREY AVENUE

POMONA

CA 91767

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 513,060.41

Gross Claim \$513,060.41

Net Claim / Payment Amount \$513,060.41

YTD Amount: \$1,538,583.63

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

TRINITY CO TREASURER

PO BOX 1297

WEAVERVILLE

CA 96093 1297

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 94,814.75

Gross Claim \$94,814.75

Net Claim / Payment Amount \$94,814.75

YTD Amount: \$284,333.82

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA CA 93291

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,123,248.29

Gross Claim \$1,123,248.29

Net Claim / Payment Amount \$1,123,248.29

YTD Amount: \$3,368,436.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA

CA 95370

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 176,460.95

Gross Claim \$176,460.95

Net Claim / Payment Amount \$176,460.95

YTD Amount: \$529,177.31

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 57 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A

PAYMENT ISSUE DATE: 10/15/2013

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO

CA 95798 0307

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 **To** 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,916,156.07

Gross Claim **\$1,916,156.07**

Net Claim / Payment Amount **\$1,916,156.07**

YTD Amount: **\$5,746,236.28**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300070A
PAYMENT ISSUE DATE: 10/15/2013

YOLO COUNTY TREASURER
PO BOX 1995

WOODLAND

CA 95695

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 09/01/2013 To 09/30/2013

Payment Calculations:

Mental health Services apportionment amount for current period 500,062.10

Gross Claim \$500,062.10

Net Claim / Payment Amount \$500,062.10

YTD Amount: \$1,499,603.83

For assistance, please call: John Bodolay at (916) 323-2154

10/9/2013

Page 59 of 59